

CLAIMS ONLY

Application Number

10/679708

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
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42						
43						
44						
45						
46	1					
47		1				
48		1				
49		1				
50		1				
Total Indep	1					
Total Depend	4					
Total Claims	5					
51						
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100						
Total Indep	0					
Total Depend	15					
Total Claims	15					